

Utility Billing 3NFN, (425) 556-2152 PO BOX 97010, Redmond, WA 98073-9710 Email: utilitybilling@redmond.gov

## REQUEST FOR NEW WATER AND SEWER SERVICE - BUYER

~~~If you are a new tenant please do not complete this form. In order to establish a new account, the property owner must complete the "Request to Bill Tenant" form.

| Date:                 |                                         | PLEASE PRINT, Thank you.   |                              |             |          |  |
|-----------------------|-----------------------------------------|----------------------------|------------------------------|-------------|----------|--|
| Redmond Service       | Address:                                |                            |                              |             |          |  |
| Closing Date:         |                                         | Date of Possession:        |                              |             |          |  |
| If Possession         | date is different than the closi        | ng date, please explain be | elow in add                  | ditional co | mments.  |  |
| Buyer's Name:         |                                         |                            |                              |             |          |  |
| 2 <sup>nd</sup> Name: |                                         |                            |                              |             |          |  |
| Telephone numbe       | rs: List at least one                   | e daytime number.          | Please circle type of phone: |             | f phone: |  |
|                       |                                         |                            | Home                         | Work        | Cell     |  |
|                       |                                         |                            | Home                         | Work        | Cell     |  |
|                       |                                         |                            | Home                         | Work        | Cell     |  |
|                       |                                         |                            | Home                         | Work        | Cell     |  |
| Email Address:        |                                         |                            |                              |             |          |  |
| Additional Comme      |                                         |                            |                              |             |          |  |
|                       |                                         |                            |                              |             |          |  |
| Requestor's Name      | )                                       | Phor                       | Phone number                 |             |          |  |
| Please mail or fax    | the completed form to the City          | y of Redmond:              |                              |             |          |  |
| Mailing Address:      | City of Redmond<br>Utility Billing 3NFN | Phone Number:              | (425) 55                     | 6-2152      |          |  |

Fax Number:

(425) 556-2198

Email: utilitybilling@redmond.gov

PO Box 97010

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